-		CLAIMS	C CII CE	0407								
		CLAIMS A	(Colur			பாள 2)	SMAL TYPE		YIIIN	OR	OTHER SMALL	
OTAL CLAIMS		31	31				E	FEE	7	RATE	FEI	
DA		NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.0	
OTAL CHARGEABLE CLAIMS		3/ minus 20=		• //		X\$ 8	 =		ОЯ	X\$18=	199	
	EPENDENT C	CLAIMS	4 minus 3 =		• /		X42	_		OR	X84=	84
ILTIPLE DEPENDENT CLAIM P			RESENT				+140			1		07
•		e in column 1 is	•			column 2	TOTA			OR OR	+280=	100
	C	(Column 1)	AMENDE	D - PAR (Colur		(Column 3)	SMA	LLE	ENTITY	OR	OTHER SMALL	
		CLAIMS REMAINING		HIGH		PRESENT		٦	ADDI-	1		ADD
	<i>'</i>	AFTER AMENDMENT		PAID	DUSLY	EXTRA	PATI		TIONAL FEE		RATE	TION.
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